

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10 554451

FILING DATE

APPLICANT(S)

**CLAIMS**

|              | AS FILED |      | AFTER<br>1 <sup>st</sup> AMENDMENT |      | AFTER<br>2 <sup>nd</sup> AMENDMENT |      |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
|              | IND.     | DEP. | IND.                               | DEP. | IND.                               | DEP. |
| 1            | /        |      | /                                  |      |                                    |      |
| 2            |          | /    |                                    | /    |                                    |      |
| 3            |          | /    |                                    | /    |                                    |      |
| 4            |          | /    |                                    | /    |                                    |      |
| 5            |          | /    |                                    | /    |                                    |      |
| 6            |          | /    |                                    | /    |                                    |      |
| 7            |          | /    |                                    | /    |                                    |      |
| 8            |          | /    |                                    | /    |                                    |      |
| 9            |          | /    |                                    | /    |                                    |      |
| 10           |          | /    |                                    | /    |                                    |      |
| 11           |          | /    |                                    | /    |                                    |      |
| 12           |          | /    |                                    | /    |                                    |      |
| 13           |          | /    |                                    | /    |                                    |      |
| 14           |          | /    |                                    | /    |                                    |      |
| 15           |          | /    |                                    | /    |                                    |      |
| 16           |          | /    |                                    | /    |                                    |      |
| 17           |          | /    |                                    | /    |                                    |      |
| 18           |          | /    |                                    | /    |                                    |      |
| 19           |          | /    |                                    | /    |                                    |      |
| 20           |          | /    |                                    | /    |                                    |      |
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| 23           |          | /    |                                    | /    |                                    |      |
| 24           |          | /    |                                    | /    |                                    |      |
| 25           |          | /    |                                    | /    |                                    |      |
| 26           |          | /    |                                    | /    |                                    |      |
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| 28           |          | /    |                                    | /    |                                    |      |
| 29           |          | /    |                                    | /    |                                    |      |
| 30           |          | /    |                                    | /    |                                    |      |
| 31           |          | /    |                                    | /    |                                    |      |
| 32           |          | /    |                                    | /    |                                    |      |
| 33           |          | /    |                                    | /    |                                    |      |
| 34           |          | /    |                                    | /    |                                    |      |
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| 36           |          | /    |                                    | /    |                                    |      |
| 37           |          | /    |                                    | /    |                                    |      |
| 38           |          | /    |                                    | /    |                                    |      |
| 39           |          | /    |                                    | /    |                                    |      |
| 40           | /        |      | /                                  |      |                                    |      |
| 41           |          | /    |                                    | /    |                                    |      |
| 42           |          | /    |                                    | /    |                                    |      |
| 43           |          | /    |                                    | /    |                                    |      |
| 44           |          | /    |                                    | /    |                                    |      |
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| 46           |          | /    |                                    | /    |                                    |      |
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| 48           | /        |      | /                                  |      |                                    |      |
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| TOTAL IND.   |          | ↓    |                                    | ↓    |                                    | ↓    |
| TOTAL DEP.   | ←        |      | ←                                  |      | ←                                  |      |
| TOTAL CLAIMS |          |      |                                    |      |                                    |      |

|              | AS FILED |      | AFTER<br>1 <sup>st</sup> AMENDMENT |      | AFTER<br>2 <sup>nd</sup> AMENDMENT |      |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
|              | IND.     | DEP. | IND.                               | DEP. | IND.                               | DEP. |
| 51           |          | /    |                                    | /    |                                    |      |
| 52           |          | /    |                                    | /    |                                    |      |
| 53           |          | /    |                                    | /    |                                    |      |
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| 82           |          |      |                                    |      |                                    |      |
| 83           |          |      |                                    |      |                                    |      |
| 84           |          |      |                                    |      |                                    |      |
| 85           |          |      |                                    |      |                                    |      |
| 86           |          |      |                                    |      |                                    |      |
| 87           |          |      |                                    |      |                                    |      |
| 88           |          |      |                                    |      |                                    |      |
| 89           |          |      |                                    |      |                                    |      |
| 90           |          |      |                                    |      |                                    |      |
| 91           |          |      |                                    |      |                                    |      |
| 92           |          |      |                                    |      |                                    |      |
| 93           |          |      |                                    |      |                                    |      |
| 94           |          |      |                                    |      |                                    |      |
| 95           |          |      |                                    |      |                                    |      |
| 96           |          |      |                                    |      |                                    |      |
| 97           |          |      |                                    |      |                                    |      |
| 98           |          |      |                                    |      |                                    |      |
| 99           |          |      |                                    |      |                                    |      |
| 100          |          |      |                                    |      |                                    |      |
| TOTAL IND.   | 3        | ↓    |                                    | ↓    |                                    | ↓    |
| TOTAL DEP.   | 16       | ←    |                                    | ←    |                                    | ←    |
| TOTAL CLAIMS | 19       |      |                                    |      |                                    |      |